



Division of Laboratory Services  
630 Hart Lane  
Nashville, TN 37216  
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

**Disease/Agent Suspected or Test Requested:**

**Influenza virus, Novel or pandemic**  
**Influenza A strain, H5 or H7 from Human**

<b>Provider Requirements</b>	<ul style="list-style-type: none"><li>• NOTIFY <a href="#">CEDEP</a>.</li><li>• Isolate submission <b>REQUIRED</b>-Sentinel provider network and EIP providers, or as authorized through CEDEP only.</li></ul>	
<b>Acceptable Specimen Sources/Type(s) for Submission</b>	<ul style="list-style-type: none"><li>• Nasopharyngeal (NPS)</li><li>• Nasal (NS)</li><li>• Throat (TS)</li><li>• Nasal aspirate (NA)</li><li>• Nasal wash (NW)</li></ul>	<ul style="list-style-type: none"><li>• DPS/TS bronchial alveolar lavage (BAL)</li><li>• Bronchial wash (BW)</li><li>• Tracheal aspirate (TA)</li><li>• Sputum</li><li>• Lung tissue</li></ul>
<b>TDH Requisition Form Number</b>	PH - 4149 – Contact <a href="#">CEDEP</a>	
<b>Media Requirements</b>	Viral Transport Media. <b>Refrigerate after collection.</b>	
<b>Special Instructions</b>		
<b>Shipping Instructions</b>	Ship <b>COLD</b> on cold packs Ship on dry ice <i>if already frozen</i>	
<b>Laboratory Section Performing Testing</b>	Virology	
<b>Lab Location(s) Performing Test</b>	Nashville	

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).